## **Table of Contents**

State/Territory Name: Colorado

State Plan Amendment (SPA) #: CO-14-032

This file contains the following documents in the order listed:

1) Approval Letter

- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

**TN:** CO-14-032 **Approval Date:** 09/16/2014 **Effective Date** 08/01/2014

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 1600 Broadway, Suite 700 Denver, CO 80202-4967



## Region VIII

September 18, 2014

Susan E. Birch, MBA, BSN, RN, Executive Director Department of Health Care Policy & Financing 1570 Grant Street Denver, CO 80203-1818

RE: Colorado #14-032

Dear Ms. Birch:

We have reviewed the proposed State Plan Amendment (SPA) submitted under transmittal number (TN) 14-032. This amendment removes the Primary Care Physician Program from the State Plan.

Please be informed that this State Plan Amendment was approved today with an effective date of August 1, 2014. We are enclosing the CMS-179 and the amended plan page(s).

If you have any questions concerning this amendment, please contact Curtis Volesky at (303) 844-7033.

Sincerely,

/s/

Mary Marchioni Acting Associate Regional Administrator Division for Medicaid & Children's Health Operations

cc: Suzanne Brennan
Pat Connally
Barb Prehmus
John Bartholomew
Max Salazar

ENTERO FOR MEDIOTICE & MEDIOTIC SELECTION OF	1. TRANSMITTAL NUMBER:	2. STATE:
TRANSMITTAL AND NOTICE OF APPROVAL OF	14-032	COLORADO
STATE PLAN MATERIAL	3. PROGRAM IDENTIFICATION:	
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE	
CENTERS FOR MEDICARE & MEDICAID SERVICES	August 1, 2014	
DEPARTMENT OF HEALTH AND HUMAN SERVICES	-	
5. TYPE OF PLAN MATERIAL (Check One):		
NEW STATE PLAN AMENDMENT TO BE CONSIDE	ERED AS A NEW PLAN	X AMENDMENT
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMEN		ach amendment)
6. FEDERAL STATUTE/REGULATION CITATION	7. FEDERAL BUDGET IMPACT	
42 CFR § 438.1	a. FFY 2014-15: \$0 b. FFY 2015-16 \$0	
		OUREROEDER STAN
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Attachment 3.1-F Section 2 (PCPP) (TN 13-003)	
Attachment 3.1-F Section 2 (PCPP)		
	Attachment 3.1-r Section 2 (I	FOI F) (114 10-000)
10. OUR IFOT OF AMENDMENT		
10. SUBJECT OF AMENDMENT  This proposed state plan amendment would remove the Proposed state plan amendment with the Proposed stat	rimary Care Physician Program	from the State Plan.
11. GOVERNOR'S REVIEW (Check One)		
11. GOVERNOR & REVIEW (CHECK CHO)		
GOVERNOR'S OFFICE REPORTED NO COMMENT	X OTHER, AS SPECIFIED	
30 VERWORK 3 0 1 1 2 1 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 1 2 1		240 4 1 2044
	Governor's letter dated	01 September 2011
COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	• •	
NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTA	AL DETURN TO	
12. SIGNATURE OF STATE AGENCY OFFICIAL	16. RETURN TO	
	Colorado Department of Health	Care Policy and Financing
	☐ 1570 Grant Street	
13. TYPED NAME	Denver, CO 80203-1818	
Suzanne Brennan	Attn: Barbara Prehmus	
14. TITLE		
Director, Medical & CHP+ Program Administration Office		
15. DATE SUBMITTED	1	
7/25/2014		
	LEGE LISE ONLY	
FOR REGIONAL O	40 DATE ADDDOVED	
17. DATE RECEIVED <b>7/25/14</b>	9/16/	14
PLAN APPROVED – O	NE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL	20. SIGNATURE OF REGIONAL OFFICIAL	
8/1/14	/s/	
	22. TITLE	
21. TYPED NAME		DMCHO
Mary Marchioni	Acting ARA,	DINIONO
23. REMARKS		
ZO. INCHINA		

CMS-PM-XX-X Date:

State: <u>COLORADO</u>

ATTACHMENT 3.1-F Section 2 (PCPP), Page 1 OMB No.:0938-0933

Citation

Condition or Requirement

SECTION 2: PRIMARY CARE PHYSICIAN PROGRAM (PCPP)

This Section has been deleted effective August 1, 2014.

TN No. 14-032

Approval Date 9/16/14

Supersedes TN No. 13-003

Effective Date August 1, 2014